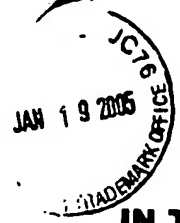


ACP 3/2/05



**PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re U.S. Patent No. 6,840,632
Issued: January 11, 2005
Atty Dkt: SHYU3008/BEU
Serial No: 10/651,990
Inventor: Jyh-Horng SHYU

2005 JAN 28 PM 2:17

RECEIVED
DIVISION

Title: PROJECTION OPTICAL SYSTEM HAVING A WEDGE PRISM

REQUEST FOR REFUND OF PETITION FEE

COMMISSIONER OF PATENTS
Director of the U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA. 22313-1450

Sir:

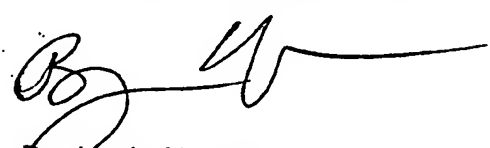
The petition fee of \$110, for the above-identified patent was paid on September 7, 2004 along with the response filed. However, our deposit account shows a withdrawal from the Patent Office of \$110 for the petition fee on September 13, 2004.

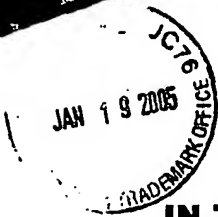
Therefore a refund of the petition fee of \$110 is requested and that it be deposited in our Deposit Account No. 02-0200.

Date: January 19, 2005

Respectfully submitted,
BACON & THOMAS, PLLC

BACON & THOMAS
625 Slaters Lane, Fourth Floor
Alexandria, Virginia 22314
Phone: (703) 683-0500


Benjamin E. Urcia
Registration No. 33,805



DCP 5.8.05

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: JYH-HORNG SHYU ET AL

SERIAL NO.: 10/651,990

GROUP ART UNIT: 2851

EXAMINER: W. Dowling

ATTY. REFERENCE: SHYU3008/beu

FILED: September 2, 2003

FOR: Projection Optical System Having A Wedge Form

COMMISSIONER OF PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a communication/amendment in the above-identified application.

- ☐ Small entity status under 37 CFR 1.9 and 1.27 is claimed.
- ☐ No additional fee is required.

The fee, if any, has been calculated as shown below:

Fee Basis	Number of Claims After Amendment	Highest Number Previously Paid For	Extra Claims	Small Entity	Full Fee
Total Claims		-	¹ =	³ × \$ 9 =	× \$ 18 =
Independent Claims		-	² =	³ × \$ 43 =	× \$ 86 =
<input type="checkbox"/> First Presentation of Proper Multiple Dependent Claim				+ \$145 =	+ \$290 =
TOTAL					

¹ If less than 20 enter 20.² If less than 3 enter 3.³ If less than 0 enter 0.

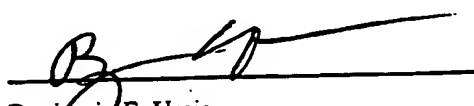
- ☐ Please charge my Deposit Account Number 02-0200 in the amount of \$ _____. A duplicate copy of this sheet is attached.
- ☐ A check in the amount of \$ _____ is attached.
- ☐ The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees due under 37 CFR 1.16 and 37 CFR 1.17 or credit any overpayment to Deposit Account Number 02-0200. A duplicate copy of this sheet is attached.
- ☒ Also enclosed is/are: Petition for a One-Month Extension of Time; Check for \$110.00

23364

Customer Number
Phone: (703) 683-0500

DATE: September 7, 2004

Respectfully submitted,


 Benjamin E. Urcia
 Attorney for Applicant
 Registration Number: 33,805